

1 on, not the type of studies the EPA should shun.
2 These are the studies that will guarantee that
3 communities don't suffer from the devastating
4 impacts of dirty water and polluted air. Studies
5 like these establish the original limits for lead,
6 and this research continues to essential today.

7 This proposed rule may seem abstract, but
8 it is anything but that. And it is extremely
9 significant. It will have far-reaching -- far-
10 reaching impacts on the ability of EPA to protect
11 all of us and our families. And it could affect
12 our most important environmental safeguards. It
13 is extremely personal, for my mom, for my family,
14 and for me.

15 I am here today to ask you to withdraw
16 this proposed rule and recommit to EPA's mission
17 of protecting human health and the environment.
18 Thank you for the opportunity to speak today.

19 MS. Hall: Thank you. Would Speaker
20 Number 22, Ms. Nsedu Obot Witherspoon, and Speaker
21 Number 23, Joanne Zurcher, please come up to the
22 speaker's table. And Speaker Number 24, Michelle

1 Endo and Speaker Number 25, Jenny Xie, I think,
2 please take a seat at the on-deck chairs.

3 [Substitution of panel members.]

4 MR. ROBBINS: Good morning. I'm Chris
5 Robbins. I'm the Acting Deputy Assistant
6 Administrative for Management in the Office of
7 Research and Development.

8 MS. ORME-ZAVALA: Good morning.

9 MR. ROBBINS: Thank you.

10 MS. DOA: Good morning. My name is Maria
11 Doa , I am in the Office of Research and
12 Development.

13 MS. WITHERSPOON: Good morning. I'm
14 Nsedu Obot Witherspoon. I'm the Executive
15 Director for the Children's Environmental Health
16 Network. My name is spelled N-S-E-D-U O, B as in
17 boy, O-T W-I-T-H-E-R-S-P-O-O-N.

18 For over 26 years, the Children's
19 Environmental Health Network, also known as CEHN,
20 has been a national voice committed to protecting
21 all children from the harmful effects of
22 environmental hazards, and to promoting a

1 healthier environment.

2 CEHN educates decision makers and
3 advocates for evidence-based child protective
4 policies. We also ensure that those who care for
5 children, personally or professionally, have the
6 information they need to take the steps to reduce
7 children's exposures to harmful toxicants.

8 As the Executive Director, and on behalf
9 of CEHN, I appreciate the opportunity to provide
10 these comments on the EPA proposed rule,
11 "Strengthening Transparency in Regulatory
12 Science."

13 CEHN is strongly opposed to the rule and
14 is concerned that it will adversely affect EPA's
15 ability to use the best available science in
16 decision-making, and negatively influence existing
17 and future protections for children's health, such
18 as clean air, clean water, and the prevention of
19 toxic exposures.

20 The exposed rule sets transparency
21 standards that are too rigid and impossible to
22 meet. It requires that all data used in

1 rulemaking be publicly made available, and allows
2 EPA to exclude data that relies on confidential
3 patient information. Critical studies which have
4 led to significant advancements in protective
5 policies, for example from the NIEHS, EPA's
6 Children's Environmental Health, and Disease
7 Prevention Research Centers may very well be
8 excluded.

9 The scientific research that EPA uses
10 already undergoes a long-established transparent
11 review process, and makes available the scientific
12 studies it relies on to inform policy. Sometimes
13 studies contain private medical data that legally
14 can't and should not be made public. In those
15 cases, independent review bodies have also
16 examined the studies and weighed in on the
17 research. No legitimate reason exists to exclude
18 those studies and their critical important
19 findings.

20 Health based research involves people and
21 often the collection of private information.
22 There are no systems in place to protect this

1 information. The federal government must continue
2 to protect private information about patients, and
3 not allow this information to be made public.
4 Otherwise, patients will not participate in these
5 important studies.

6 Further, redacting personal information
7 actually sounds easy, however, it is cumbersome
8 and quite costly. EPA will not likely have the
9 resources to redact personal information resulting
10 in exclusion of critical studies.

11 The proposed rule would restrict EPA's
12 ability to set regulations informed by
13 confidential data that cannot be replicated. This
14 is of serious concern because for many older,
15 long-standing landmark studies, the original data
16 sets were either not maintained, or stored in out
17 of date formats. These could be eliminated under
18 this proposed rule.

19 The proposed rule could block the use of
20 studies on the harmful impacts of toxic exposures
21 and pollution. Studies which were instrumental in
22 the Clean Air Act, the Safe Drinking Water Act,

1 and the -- excuse me, Food Quality Protection Act,
2 among many others. We do request that you
3 withdraw this proposal, "Strengthening
4 Transparency and Regulatory Science." If the
5 proposed rule is implemented, an inevitable
6 consequence is that children that could have been
7 protected from chemical exposures will lose those
8 opportunities.

9 Irreversible damage to children in their
10 growth and development, loss of intelligence,
11 behavior modifications, and overall life
12 achievement is the future ahead, and I would hope,
13 not the legacy that this EPA would like to
14 preserve. Thank you very much.

15 MR. ROBBINS: Thank you.

16 MS. ZURCHER: My name is Joanne Zurcher,
17 J-O-A-N-N-E Z-U-R-C-H-E-R, and I'm representing
18 the National Environmental Health Association.

19 Good morning. Thank you for the
20 opportunity to speak to you on behalf of the
21 environmental health professionals from across the
22 country who've vigorously opposed the Censoring

1 science rule.

2 My name is Joanne Zurcher, and I am the
3 Director of Government Affairs for the National
4 Environmental Health Association, NEHA.

5 Environment health is profoundly local.
6 Simply put, it's the cleanliness of the water from
7 the kitchen faucets. It's the safety of the food
8 we feed our families, our friends, and ourselves.
9 It's the air the children breath during the 1,600
10 hours they spend inside their schools. It's the
11 cleanliness of our community beaches that our
12 families are spending the summer enjoying.

13 When things go well, environmental health
14 is not on the front page of the *New York Times*,
15 because environmental health professionals keep us
16 safe every single day.

17 NEHA has over 7,000 members. Our members
18 anticipate, recognize, evaluate, and control
19 hazards that are likely to cause harm, serious
20 illness, or even death to American families.
21 Examples include lead, radon, legionella viruses,
22 harmful algae blooms, PFOA, PFOS, Zika viruses,

1 and many other natural and man-made risks. Our
2 members possess strong science and math
3 backgrounds. They must take over 30 units of
4 undergraduate math and science just to sit for our
5 exam. They have the unique ability to work with
6 clinical and nonclinical professionals. They know
7 and work with the regulated community. They are
8 credentialed members of the profession, and the
9 NEHA credential is considered the gold standard.

10 EPA science is the foundation for
11 informed decision-making for our members. Our
12 members turn to the EPA for best practices. Our
13 members rely on EPA research to promote their
14 community's health.

15 Our communities see EPA as the shelter of
16 scientific certainty in an era of uncertainty.
17 Our members rely on EPA expertise, whether it's
18 continuing -- excuse me, containing mercury spills
19 in their homes, setting standards to keep toxic
20 chemicals out of drinking water, or cleaning up
21 super fund sites, just to name a few of the few
22 activities we do together. EA professionals work

1 closely with the EPA every step of the way.

2 The EPA has administered successfully,
3 the Clean Water Act, and the Clean Air Act, and
4 these acts should be expanded based on scientific
5 research. The EPA should not be working to
6 undermine scientific research. Instead, this EPA
7 should be working to provide running water to the
8 630,000 American families who do not have running
9 water in their homes.

10 Let's be clear, this proposed rule
11 undermines the EPA's mission to protect human
12 health. Now is not the time to compromise health
13 of our nation by casting a shadow of uncertainty
14 on the integrity of the EPA -- of EPA's research.

15 EPA research is globally recognized as
16 the foundation for informed decision-making that
17 affects every person the planet. NEHA and its
18 7,000 members are in every community and territory
19 in the nation. Every EH professional relies on
20 EPA research to ensure constituents meet human --
21 meet their human potential.

22 The current research system works, which

1 at once protects the identity of every research
2 participant, while promoting the health of every
3 American. Health research sometimes includes
4 sensitive data from patients, such as medical
5 history and geographic location, which must be
6 continued to be private and protected. Crucial
7 volunteers will cease to come forward for
8 scientific research if their medical history and
9 geographic information will be made public, thus
10 putting critical scientific research at risk.

11 Please do not destroy a national gem, our EPA
12 research, because you, your family, and your
13 community deserve no less than a fully functional
14 research system that protects and identifies
15 research subjects while promoting the health of
16 the nation.

17 NEHA and the environmental health
18 professionals from across the United States
19 vigorously oppose the censoring scientific rule.
20 Thank you for this opportunity to be heard on this
21 important topic, and please remember, do no harm.

22 MR. ROBBINS: Thank you.

1 MS. HALL: Would Speaker Number 24,
2 Michelle Endo, and speaker Number 25, Jenny Xie,
3 come up to the speaker's table. And Speaker
4 Number 26, Ann Mesnikoff, and Speaker Number 27,
5 Roy Gamse, please take a seat at the speaker's --
6 well, at the on-deck chairs.

7 Speakers are reminded to speak into the
8 mic and state your organization.

9 MS. ENDO: My name is Michelle Endo, E-N-
10 D-O, and I'm speaking in a personal capacity, but
11 I'm an intern at the Environmental Defense Fund.

12 So my name is Michelle Endo, and I'm a
13 second-year student at Georgetown Law. I'm also a
14 legal intern at the Environmental Defense Fund
15 here in Washington, D.C. I'm here today to offer
16 comments on my own behalf and to present my grave
17 concerns with EPA's proposed rule, "Strengthening
18 Transparency in Regulatory Science."

19 I'm a fourth generation Southern
20 Californian who lived the first 18 years of my
21 life in Northern Los Angeles County. And while
22 I'm proud to be from the Golden State, it also

1 means that I grew up breathing some of the worst
2 air pollution in the nation. Despite tremendous
3 improvement, 70 percent of Californians live in an
4 area with unhealthy air. As a result, I also grew
5 to be familiar with the dangers of air pollution
6 and the importance of health-protective
7 regulation.

8 My family lives in a town that, like much
9 of LA County, is in the United States 98th
10 percentile for tropospheric ozone, according to
11 EPA's own Environment Justice Screen.

12 Tropospheric ozone, commonly referred to
13 as smog, is the visible layer of air pollution
14 that gives LA sunsets their famous striped hues.
15 Several studies have consistently reported there
16 is a significant association between ozone
17 pollution and premature death. According to the
18 American Lung Association, long-term exposure to
19 ozone pollution is also linked to developmental
20 harm, reproductive harm, cardiovascular harm, and
21 increased susceptibility to infections.

22 While I never had a snow day before

1 moving to D.C., like most SoCal kids, I'm very
2 familiar with bad air days. Instead of playing
3 outside and building snowmen, children in Southern
4 California lose all outdoor playtime on bad air
5 days in order to avoid the harmful effects of
6 smog. Coughing, impaired athletic performance,
7 eye irritation, chest pain, nausea, headaches, and
8 respiratory congestion.

9 Smoggy days can also worsen asthma, heart
10 disease, bronchitis, and emphysema.

11 My sister and I enjoyed the early years
12 of childhood with fewer complications relative to
13 my neighbor peers. But before even starting high
14 school we both had missed days of school for nose
15 bleeds that were likely triggered by the
16 irritating smog that settled in the valley, and
17 because ozone forms by the interaction of sunlight
18 with hydrocarbons and nitrogen oxides emitted from
19 cars and trucks, bad air days tended to worsen each
20 year, our Southern California summers, broke
21 standard heat records of years before.

22 Shortly after my sister joined the high

1 school soccer team, my family started to notice
2 that her once limitless stamina on the field was
3 wearing down. One particularly hot and hazy day,
4 she had no choice but to walk off the field in the
5 middle of the match. Clutching her chest, she
6 struggled to breath. We later learned that she
7 had developed asthma from LA's unhealthy smog,
8 like many of our friends and family in the area.

9 It was experiences like this that
10 motivated my decision to study environmental
11 policy in college, and that continued to drive my
12 legal career. Having witnessed first-hand the way
13 in which the geography of where one lives, plays,
14 learns, works, and grows determines one's health
15 outcomes, I could not have chosen another path in
16 good conscience.

17 When I first chose this path, over eight
18 years ago, my hope was to strengthen the laws and
19 regulations that did not go far enough to protect
20 my family and our environment.

21 Under the Clean Air Act, EPA was required
22 to establish and regularly update federal

1 standards for hazardous air pollutants, including
2 asthma-causing particulate matter and ozone.
3 These standards and the National Ambient Air
4 Quality Standards or NAAQS, form the backbone of
5 our nation's air quality protections. Although
6 the NAAQS did not prevent my sister's asthma, they
7 have and continue to bring about substantial
8 improvement in our nation's air quality since
9 their first formulation.

10 The EPA's proposed rule would have
11 excluded peer review studies that form the
12 scientific basis of NAAQS. For example, peer
13 reviewed studies would be excluded because the
14 underlying data and models cannot be disclosed,
15 even in partial form. In fact, the standards
16 would not have been issued had the proposed rule
17 been in place when they were first enacted in the
18 1970s, because EPA would have tossed out the
19 underlying studies, tying its hands from taking
20 action in imminent public health concerns.

21 Without a doubt, many more Southern
22 Californians would have had their lives altered,

1 or even cut short by dangerous levels of air
2 pollution.

3 If adopted, the proposed rule would
4 deprive EPA policy makers from real world evidence
5 and studies that are vital to the EPA's review of
6 the NAAQS into the future. Further, the proposal
7 directly contravenes the comprehensive federal and
8 state regulatory program congress envisioned when
9 drafting the Clean Air Act of 1970. It reduces
10 our public health legislation to mere
11 declarations, as EPA would severely delayed if not
12 rendered entirely unable to establish future
13 standards using the best available science.

14 Generations before me, through
15 legislation like the Clean Air Act, recognize that
16 public health and environmental pollution required
17 strong federal leadership and expert agencies like
18 EPA. Departing from the Agency's practice of
19 scientific review for over the last 40 years,
20 practices aligned with national and
21 intergovernmental bodies, like the Royal Society
22 of Medicine, and the World Health Organization,

1 jeopardizes EPA's ability to utilize its expertise
2 with high cost to people's health.

3 It is therefore troubling that the Agency
4 has proposed to take this action under the guise
5 of scientific integrity without consulting its own
6 panel of scientific experts, the Science Advisory
7 Board, and against the advice of leading
8 scientific journals and organizations. It is even
9 more troubling when considering the Agency's
10 recent practices toward the public and the press,
11 which have been far from transparent.

12 To me, it is clear the proposal's
13 purported goal of transparency is a pretext for
14 the Agency's attempt to shirk its statutory
15 command. For the health of my sister, my friends,
16 and all Americans, I urge EPA to abandon this
17 proposed rule. Thank you.

18 MR. ROBBINS: Thank you.

19 MS. XIE: Good morning. My name is Jenny
20 Xie, J-E-N-N-Y, last name X-I-E, and I'm a policy
21 intern at the Environment Defense Fund, but I'm
22 here today speaking from a personal capacity to

1 express my personal opposition to EPA's proposed
2 rule, "Strengthening Transparency in Regulatory
3 Science."

4 Many of the activities that I am involved
5 in on campus involve holding the university
6 accountable for its environmental goals that it
7 has set. I'm currently a student at Cornell
8 University, studying English and Environmental
9 Sustainability Sciences.

10 In fact, one of the main initiatives that
11 I am involved in calls for the University to
12 disclose as a financial investments and fossil
13 fuels in order to increase transparency, have
14 accountability, and maintain integrity as it works
15 towards its carbon neutrality. It is therefore
16 incredibly disheartening to hear that this EPA
17 administration is championing a proposed rule that
18 claims to be for increased transparency, when in
19 fact the purpose and the fact of the proposed
20 would be to bar EPA from considering rigorous
21 public health science and reduce the transparency
22 of EPA's scientific analysis.

1 The proposed rule would require the EPA
2 base some of its most important regulatory
3 decisions only upon does response studies where
4 the underlying data can be disclosed. The reality
5 is that key scientific studies backing our
6 nation's critical clean air safeguards which
7 protect our health and environment are based on
8 confidential patient data that in many cases
9 cannot be disclosed in any form.

10 These rigorous peer-reviewed state of the
11 art studies could be improperly discarded should
12 this rule be finalized. As many scientists have
13 noted, this would undermine and not promote the
14 use of sound science in EPA decisions. Just
15 because the data underlying a study isn't
16 published does not mean that the study cannot be
17 verified using other means.

18 For example, the American Cancer
19 Society's Cancer Prevention Study II, tracked air
20 pollution, exposure, and personal medical
21 histories of nearly 670,000 people for more than
22 two decades to understand the exact risk of air

1 pollution on death.

2 The study was based on private patient
3 information that cannot be publicly disclosed, and
4 yet the study has been subject to reanalysis and
5 its conclusions have been upheld. And allowed
6 under the scientific journal does response, the
7 authors listed 16 key studies alone which
8 supported the original conclusion of the Cancer
9 Prevention Study 2.

10 Even more concerning is the fact that the
11 proposed rule provides the administrator with
12 broad discretion to make exception to the policy
13 on a case-by-case basis. Former Administrator
14 Pruitt may be out of office now, but Acting
15 Administrator Wheeler's record as a fossil fuel
16 lobbyist for corporations like Murray Energy
17 leaves me and others incredibly skeptical that
18 this rule would be applied fairly with no concrete
19 criteria guiding decision to grant an exception.

20 This part of the proposal raises a
21 serious risk that this or future administrations
22 could selectively waive the policy to build a

1 distorted scientific record that is designed to
2 reach a desired result. In fact, just a few weeks
3 ago I was in Pennsylvania where I'm from, talking
4 to an Uber driver. He's a father with a daughter
5 who has asthma, and we talked about the EPA. He
6 had worked in public service before and expressed
7 to me how frustrated he was with the current
8 administration, with the EPA, and how it seemed
9 that despite the endless promises the
10 administration has made to protect its citizens
11 and better our lives, many of those promises were
12 not being fulfilled.

13 I can't help but think how disappointed
14 he would be if he knew that the EPA has proposed a
15 rule which will make it more difficult for EPA to
16 use the best science to protect the health of him
17 and his family. Citizens are watching and aware,
18 from parents, to scientists, to students like me
19 who advocate for good policy on their own college
20 campuses.

21 The EPA hastily shuttled this rule past
22 even the OMB, but it must pause to hear the

1 concerns of the public. EPA's proposal will lead
2 to censored science, not transparent science.
3 Thank you for the opportunity to testify on the
4 proposed rule today.

5 MR. ROBBINS: Thank you.

6 MS. HALL: Would Speaker Number 26, Ann
7 Mesnikoff, and Speaker Number 27, Roy Gamse, come
8 up to the speaker's table. And Speaker Number 28,
9 Jennifer Sabb (sic), and Speaker Number 29, Paul
10 Miller, please take your seat at the on-deck
11 chairs.

12 MS. MESNIKOFF: Hi. I'm Ann Mesnikoff.
13 It's M-E-S-N-I-K-O-F-F, and A-N-N, no E.

14 Good morning. I'm Ann Mesnikoff. I'm
15 the Federal Legislative Director for the
16 Environmental Law and Policy Center.

17 ELPC works throughout the Great Lakes and
18 the Midwest, protecting public health and special
19 places under the belief that environmental
20 protection and economic development can be
21 achieved together.

22 ELPC appreciates the opportunity to

1 testify in opposition to EPA's proposal to censor,
2 or otherwise constrain the science it will
3 consider in issuing essential standards that are
4 meant to protect public health and our
5 environment. The Midwest and the Great Lakes
6 region, with its industrial and agricultural
7 heritage is impacted by environmental and public
8 health challenges to air, land, and water, and we
9 depend upon EPA to effectively implement
10 environmental laws to protect the public and our
11 environment.

12 There is no basis in existing bedrock
13 environmental laws that authorizes EPA to limit
14 science considered in rulemaking processes. EPA
15 cites several key laws in its justification for
16 this proposal. Nowhere in the cited statutes is
17 there a basis for demanding access to raw data,
18 nor does this relate sensibly to any definition of
19 best available science. Rather, this undermines
20 the use of best available science called for in
21 environmental statutes, including the Clean Air
22 Act.

1 Further, there is no basis for
2 politically appointed administrators to choose
3 which science will be considered, and which may
4 not be. EPA should continue to apply the rigorous
5 standards the Agency has used for decades, and
6 that stakeholders engage in the process that is
7 full and open with regards to science.

8 EPA's Science Advisory Board voted to
9 review this action during its June 1st meeting.
10 This proposal has also prompted, as we've heard
11 today, vehement reaction from the scientific
12 community. EPA's proposal is not about
13 transparency. It is about undermining public
14 health. The negative effects of this proposed
15 rule on EPA's programs could be far reaching
16 across the Midwest. Midwesterners are exposed to
17 unhealthy levels of air pollutants, including
18 particulates, ozone, and toxic emissions from our
19 industries and agricultural operations.

20 Achieving and maintaining health air to
21 breath remains a challenge. EPA just finalized
22 not attainment designations for Midwest's biggest

1 cities. There are millions of people -- where
2 millions of people live, work, and play.
3 Foundational studies about the impact of air
4 pollution to public health are essential. These
5 studies have been reviewed numerous times. Yet,
6 under EPA's proposal, they would be ruled out of
7 bounds, compromising the Agency's ability to truly
8 assess the impacts of air pollution and to set
9 standards are a level that will protect public
10 health as the Clean Air Act requires.

11 Weaker standards will mean dirtier air in
12 our communities. The elimination of these studies
13 would also skew the evaluation of cost and
14 benefits, leading to less protective rules that
15 will not be based on a true accounting of the
16 public health costs of pollution. We're also
17 concerned about how EPA's proposal to censor
18 science will impact a range of other significant
19 concerns across the Midwest and Great Lakes, from
20 using the best available science and its review of
21 toxic -- the toxic insecticide, chlorpyrifos, the
22 impacts of growing problems of harmful algal

1 blooms in Lake Erie and other places across the
2 Great Lakes on public health, and in setting
3 standards for lead in water, soil, and in homes.

4 EPA has shown time and again that
5 achieving cleaner air, and water, and a healthier
6 environment go hand-in-hand with economic growth.
7 Our children's health across the Midwest depends
8 on EPA continuing to do its job and not let
9 industry-driven agenda undermine its essential
10 role. We respectfully ask EPA to withdraw this
11 proposal. We will be submitting more detailed
12 comments to the record. Thank you.

13 MR. ROBBINS: Thank you.

14 MR. GAMSE: I am Roy Gam -- I am Roy
15 Gamse, G-A-M-S-E, no S on the end. Formerly EPA
16 Deputy Assistant Administrator. Reading the
17 comments of John Bachmann of the Environmental
18 Protection Network. He served EPA for 33 years,
19 was Associate Director of Science Policy and New
20 Programs for the Office of Air Quality Planning
21 and Standards.

22 John's comments. "I appreciate the

1 opportunity to provide the comments on the
2 proposed rulemaking on strengthening transparency
3 on behalf of EPN. EPN will submit the detailed
4 written comments on the proposal later."

5 "This proposal would not strengthen
6 transparency of regulations. Instead, it would
7 preclude the assessment and use of best scientific
8 information available as required by all major
9 statutes administered by EPA. The process by
10 which it was developed, the misuse of references
11 that ultimately do not support its arguments and
12 the lack of specifics, what EPA actually intends
13 to do are an embarrassment to the agency."

14 "The new acting administration should
15 withdraw it from consideration as soon as
16 possible. EPA's proposal is a solution in search
17 of a problem. A proposal asserts it's dealing
18 with a replication crisis, but does not cite a
19 single instance where a study used by EPA for any
20 type of major rule was shown to be flawed due to a
21 lack of access to the underlying data. In fact,
22 EPA and the industry funded an independent

1 reanalysis of the two air pollution studies that
2 were criticized for not releasing confidential
3 health information, and both were successfully
4 reproduced with the results published in 2000.
5 Moreover, their key findings have been replicated
6 dozens of times since then by other investigators
7 using different health and air quality data."

8 "The proposal to exclude important peer
9 reviewed studies is wholly inconsistent with
10 scientific practice and EPA's past use of science
11 and regulatory decisions, where studies with novel
12 results appear, EPA's assessments have noted
13 limitations and some cases supported reanalysis."

14 "EPA's science policy related assessments
15 are, themselves, peer-reviewed by the SAB or CASAC
16 to further ensure study evaluations consider all
17 of the relevant scientific literature."

18 "As noted by the SAB workgroup, the EPA's
19 proposal downplays valid concerns about the risks
20 of providing access to the confidential
21 information of subjects in epidemiology studies.
22 The SAB group noted some of the largest most

1 useful health effects data sets cannot be made
2 fully public because certain personal information
3 of age, sex, health, and location could be used to
4 identify participants, or because of agreements
5 made with study participants in advance."

6 "EPA failed to mention various ways to
7 assess the validity of fire epidemiology studies
8 without access to data, nor that the rule may
9 preclude continued use of studies published many
10 years ago."

11 "The proposal includes a provision for
12 the administrator to waive this requirement. No
13 clear decision criteria provided to allow EPA
14 scientists and stakeholders to understand when and
15 how the waivers would be granted. It appears that
16 requirement could be applied in an arbitrary and
17 capricious manner that does not reflect sound
18 science judgment. Critical decisions like these
19 must be made on the basis of science, not
20 politics. Otherwise, highly relevant studies for
21 which data can't be publicly shared, even if
22 published in the best peer reviewed journals and

1 replicated may be judged to be inherently
2 untrustworthy."

3 "The rushed, mostly secret process EPA
4 followed in developing the proposal displays a
5 complete disinterest in transparency, much less in
6 science. In developing this proposal EPA
7 leadership did not provide a role for zone career
8 science experts in crafting the proposal, never
9 included the rule on its regulatory agenda, did
10 not notify of consult with the SAB, much less
11 request the review as required by law. Did not
12 solicit the advice of the NAS on provisions that
13 would change does response models used in risk
14 assessment from those previously recommended by
15 NAS, did not ask for review to solicit the views
16 of other federal agencies that conduct research or
17 use health effect science in developing
18 regulations. Finally, the Agency originally only
19 allowed a 30-day comment period on this remarkable
20 unvetted departure from the past practice."

21 "In suggesting potential cost of the rule
22 would be minimal, EPA ignored the cost to

1 researchers who would have to pay to set up and
2 maintain data sharing for their previously
3 published studies to be considered, to EPA for
4 conducting the multiple reanalysis required in
5 Section 30.6 of the rule, and to public health for
6 the disbenefits of undermining existing
7 regulations. Having done no assessment, EPA has
8 no basis for its claim that the benefits of the
9 rule exceed its cost. Scientists and scientific
10 publications that EPA cites as evidence for
11 support for this rule have rejected the proposal's
12 preemption of existing studies based on
13 availability of raw data. Professor John
14 Ioannidis reacted strongly to the proposal in an
15 editorial noting that, quote, 'If the proposed
16 rule is approved, science will be practically
17 eliminated from all decision-making processes.
18 Regulation would then depend uniquely on opinion
19 and whim.' End quote."

20 "Editors of four major scientific
21 journals whose policies EPA cited as support
22 jointly stated, quote, 'It does not strengthen

1 policies based on scientific evidence to limit the
2 scientific evidence that can inform them.
3 Excluding relevant studies simply because they
4 don't meet rigid transparency standards will
5 adversely affect decision-making processes.'" "

6 "Finally, EPA should immediately withdraw
7 this flawed proposal from consideration, given the
8 fatal flaw of establishing unnecessary regulation
9 for science assessment that would elevate
10 transparency over any other criterion. We're
11 unable to offer any suggests for improving it."

12 MR. ROBBINS: Thank you.

13 MS. HALL: Would Speaker Number 28,
14 Jennifer Sabb (sic), and Speaker Number 29, Paul
15 Miller, come up to the speaker's table. And
16 Speaker Number 30, Matthew McKinzie and Speaker
17 Number 31, Anne Mellinger-Bird (sic), take a seat
18 at the on-deck chairs.

19 Please remember to speak into the mic and
20 state your organization.

21 MS. SASS: Hello. My name is Jennifer
22 Sass, S-A-S-S. I'm with NRDC, the Natural

1 Resources Defense Council.

2 And I'm here to talk about the concern
3 that scientists and environment health and medical
4 professionals have with this rule. In one of his
5 last acts of aggression against the public before
6 resigning, the corrupt and disgraced EPA
7 Administrator Scott Pruitt, proposed the rule to
8 restrict the scientific studies that EPA could
9 rely on to set safety standards for toxic
10 chemicals.

11 Ironically, the rule is called science
12 transparency when in truth public health will be
13 seriously harmed. That's why over 40 doctors and
14 scientists released a letter today which was
15 submitted to the docket, raising alarm about the
16 rule and the harms that it would bring about.

17 In the letter, they say as scientists and
18 health professionals we recognize the importance
19 of data sharing and replicability in scientific
20 practice and discourse. The experts are part of
21 Project Tender, and their letter is also publicly
22 available.

1 They say the proposed rule is about
2 stiffing science used by EPA, not improving it.
3 They all have careers devoted to protecting
4 children and their families from exposures to
5 neurotoxic chemicals. They say the proposal could
6 also undercut existing safeguards. Regulations
7 that have led to protections against toxic air
8 pollution, lead and drinking water, and dangerous
9 pesticides, such as chlorpyrifos.

10 Dr. Phil Landrigan, a globally renowned
11 expert on childhood harm from chemical pollutants
12 warned that if you implement this proposed rule
13 the inevitable consequence is that chemicals with
14 potential to damage children's brains and nervous
15 systems will remain longer on the market, and many
16 thousands of children born, and not yet born, who
17 could have been protected against these chemicals,
18 will be unnecessarily exposed. Brain damage with
19 loss of intelligence, disruption of behavior, and
20 diminished lifetime achievement will be the
21 result. Is this the legacy that EPA wishes to
22 leave for America's children?

1 *The Economist* also wrote about the rule,
2 very bluntly in an article titled, "Swamp science:
3 Scott Pruitt embarks on a campaign to stifle
4 science at the EPA." In that *Economist* article
5 they emphasized that the proposal rule is really
6 about blocking information used by EPA to protect
7 our health. The rule prohibits the Agency from
8 setting regulations that are supported in part or
9 whole by data that is not publicly available for
10 reanalysis or that cannot be replicated. It will
11 hamstring EPA's use of scientific information,
12 which could only harm EPA's work quality and
13 public credibility.

14 There are many reasons why a study cannot
15 be made fully public or replicated. For example,
16 the original raw data may no longer be -- exist.
17 Or the original exposure conditions may no longer
18 exist, such as lead exposures from leaded
19 gasoline, and patient protection and privacy rules
20 may prevent full disclosure of the raw data, or
21 information. EPA already has long-established and
22 transparent methods for evaluating data in these

1 situations.

2 This rule would block the studies used to
3 set air pollution regulations that will have
4 prevented more than 30,000 premature deaths by
5 2020, with benefits valued at 30 times the cost of
6 the Clean Air Act, according to EPA scientists and
7 technical experts.

8 The rule would also block the studies
9 that protect children from lead poisoning in air,
10 water, and soil, and would block the studies of
11 harmed children that support an EPA proposed ban
12 on the neurotoxic pesticide chlorpyrifos, which
13 President Trump and former Administrator Pruitt
14 have already rolled back those proposals.

15 This may be the most unpopular proposal
16 from an already unpopular EPA administration to
17 date. It is a rule that fundamentally purports to
18 solve a problem that doesn't exist, and it should
19 be abandoned. It cannot be fixed. Thank you.

20 MR. ROBBINS: Thank you.

21 MR. MILLER: Hello. My name is Paul
22 Miller. It's M-I-L-L-E-R. I am Deputy Director

1 of the Northeast States for Coordinated Air Use
2 Management, or NSCAUM. NSCAUM is the regional
3 association of state air agency air quality
4 control agencies in Connecticut, Maine,
5 Massachusetts, New Hampshire, New Jersey, New
6 York, Rhode Island, and Vermont.

7 My comments today reflect the majority
8 view of NSCAUM's members, while individual members
9 may hold some views different from the majority
10 consensus.

11 In sum, we are concerned that should this
12 proposal lead EPA to not fully consider the best
13 available science in rulemakings, it will endanger
14 public health and the environment.

15 The EPA invokes strengthening
16 transparency as a primary driver for this
17 proposal, but fails to describe how a perceived
18 lack of transparency has hampered past
19 rulemakings. It provides no examples of work,
20 quote, "EPA has not previously implemented these
21 policies and guidance in a robust and consistent
22 manner," end quote, nor what are the specific

1 quote, "Agency culture and practices regarding
2 data access," end quote. That requires changing.

3 The Agency also provides no cost analysis
4 of this proposal. Without additional clarity from
5 EPA we are having difficulty identifying the
6 problem EPA seeks to address. Therefore, for the
7 following reasons we request that EPA withdraw the
8 proposed rule.

9 First, the proposal is too vague as
10 written to provide the public with meaningful
11 opportunity to comment. EPA solicits comments
12 across a long list of topic areas, but fails to
13 provide the Agency's own sufficient detail and
14 rationale on the solicited comment areas as
15 required by the Administrative Procedure Act.

16 We are left to speculate on EPA's views,
17 and on those of other commenters that would
18 presumably shape EPA's final rule. It is well
19 settled law that this approach fails to provide
20 adequate notice for informed public comment.

21 Second, EPA must describe how the
22 proposed text in Sections 30.5, 30.7, and 30.9

1 affect current practice. Section 30.5 states that
2 the Agency shall ensure that those response data
3 and models underlying pivotal regulatory science
4 are publicly available in a manner sufficient for
5 independent validation.

6 Section 30.7 states, EPA shall conduct
7 independent peer review on all pivotal regulatory
8 science used to justify regulatory decisions.
9 EPA, however, does not describe what constitutes
10 in its view, independent validation and
11 independent peer review.

12 Furthermore, Section 30.5 includes
13 qualifying language that EPA will take all
14 reasonable efforts to make data available unless
15 it is not possible due to other constraints, such
16 as legal protections of privacy and
17 confidentiality.

18 EPA provides no examples of where and
19 how, in the Agency's view, past rulemaking
20 specifically failed to make these same efforts,
21 nor how EPA would change past practice in this
22 context. Adding to the vagueness of Sections 30.5

1 and 30.7, Section 30.9 would provide the
2 administrator with broad authority to exempt
3 regulatory decisions from the proposed disclosure
4 provisions on a case-by-case basis if he or she
5 determines that compliance is impracticable. The
6 proposed rule fails to provide specific criteria
7 for determining when compliance is impracticable.

8 Lacking clear guidelines for transparent
9 decision-making, the administrator's discretion
10 would appear to be unbounded in application and
11 potentially based on haphazard and non-transparent
12 rationales.

13 Third, EPA has provided no meaningful
14 cost estimate for the proposed rule. The costs
15 are likely quite significant, however, based on a
16 congressional budget office cost estimate of the
17 similar congressional proposal.

18 In addition to lack of cost information,
19 EPA offers no accounting of foregone benefits
20 should a broad application of this proposal limit
21 the use of the best available science in setting
22 public health standards and preventing adverse

1 health outcomes.

2 In conclusion, EPA's proposal has far-
3 reaching consequences on the future use of science
4 by the agency. These consequences, however
5 significant they may be, are indeterminate in
6 light of the proposal's vagueness. The proposal
7 fails to clearly articulate the problem EPA seeks
8 to address, the specific proposed rule
9 requirements, and its cost and benefits.

10 These are well understood and basic
11 elements that federal agencies must include to
12 ensure informed public comment. Given that these
13 elements are missing from this proposed, EPA
14 should withdraw it. Thank you.

15 MR. ROBBINS: Thank you.

16 MS. HALL: Would Speaker Number 30,
17 Matthew McKinzie and Speaker Number 31, Anne
18 Mellinger-Bird (sic) come to the speaker's table.
19 Would Speaker Number 32, Erica Bardwell, and
20 Speaker Number 33, Jennifer Reaves, take a seat at
21 the on-deck chair.

22 MR. MCKINZIE: Good morning. I'm Matthew

1 McKinzie, M-C-K-I-N-Z-I-E. I'm a nuclear
2 physicist with the Natural Resources Defense
3 Council, NRDC, and I'm very pleased to talk today
4 about this proposed rule. My remarks will focus
5 in on the radiation protection aspect of the
6 proposed rule.

7 NRDC, just as background, is a national
8 non-profit organization of scientists, lawyers,
9 and environmental specialists. We are dedicated
10 to protecting the public health and the
11 environment.

12 NRDC has been engaged with the
13 environmental issues surrounding nuclear energy
14 and nuclear weapons since our founding. There's
15 something strange about the proposed rule in that
16 it does not use the word radiation, and it does
17 not cite the EPA's authority under the Atomic
18 Energy Act.

19 Nevertheless, the language of the
20 proposed rule seems to clearly implicate radiation
21 protection standards. In particular, appears to
22 undermine the basis, a fundamental basis of

1 radiation protection standards, the linear no-
2 threshold dose response model. And so that's what
3 I'll focus on with my five minutes.

4 The science in radiation epidemiological
5 studies has repeatedly demonstrated over decades
6 that linear no-threshold dose response, LNT,
7 provides the most reasonable description of the
8 relation between the low dose, low radiation dose
9 exposure, and the incidence of solid cancers that
10 are induced by that ionizing radiation.

11 EPA bases its regulatory limits and
12 nonregulatory guidelines for population exposure
13 to low-level ionizing radiation on this linear no
14 threshold model. EPA's radiation protection
15 standards are based on the premise that any
16 radiation does carries some risk, and that risk
17 increases directly with dose.

18 This method of estimating risk is called
19 LNT. For over 40 years, the LNT dose response
20 model has been commonly utilized when developing
21 practical and prudent guidance on ways to protect
22 workers and members of the public from the

1 potential for harmful effects from radiation in
2 that balance, with commercially justified and
3 optimized uses of radiation. EPA derives the LNT
4 model from reports by authoritative scientific
5 bodies, including the National Academy of
6 Sciences, NAS, the National Council on Radiation
7 Protection and Measurements, NCRP, and other
8 bodies.

9 The NCRP published its last commentary on
10 the LNT issue only weeks ago, in April of 2018,
11 reinforcing this -- the LNT as the basis for
12 radiation protection standards.

13 Epidemiological studies of humans provide
14 evidence that is critically important in
15 establishing potentially causal associations of
16 environmental factors with disease. NAS and other
17 studies that EPA has long relied upon in the
18 radiation standard setting process are
19 epidemiological human cohort studies. EPA's
20 proposed rule, if implemented, would limit EPA
21 staff from basing regulatory actions on precisely
22 these types of studies by requiring that the

1 underlying data of these studies should be
2 publicly shared, fully publicly shared. This
3 would be a nearly impossible task for the agency.

4 Data for some of the radiation
5 epidemiological studies are accessible to users,
6 with a detailed description of how a user can
7 access the information. However, public sharing
8 of personally identifiable information is
9 restricted. These are profoundly important
10 studies on radiation health effects that have been
11 peer reviewed for decades, and the science that
12 has emerged from them has been validated multiple
13 times. But these are not studies where the
14 entirety of the public data can be shared or
15 independently replicated.

16 Replication of these studies is
17 impossible as this data comes from individuals
18 exposed to significant, acute, and protracted
19 doses of radiation. Pruitt's proposed rule would
20 throw out the data from the atomic bomb survivors
21 of World War II. That's a profound, very profound
22 thing.

1 Adverse consequences for EPA would affect
2 federal guidance reports, nuclear fuel cycle
3 standards and regulations, minimum amount --
4 minimum allowed concentrations of radiation in
5 drinking water, soil clean up for super fund
6 sites, radioactive waste disposals, as well as the
7 fundamental concept of ALARA, As Low As Reasonably
8 Achievable, in radiation protection standards.

9 In conclusion, I urge the EPA to abandon
10 the proposed rule as it fundamentally calls into
11 question basic radiation protection standards that
12 are scientifically founded and have protected the
13 public for many years. Thank you.

14 MR. ROBBINS: Thank you.

15 MS. MELLINGER-BIRDSONG: Hi. My name is
16 Anne Mellinger-Birdsong, M-E-L-L-I-N-G-E-R, dash,
17 B-I-R-D-S-O-N-G.

18 Thank you for allowing me to speak today.
19 My name is Anne Mellinger-Birdsong, and I am a
20 fellow of the American Academy of Pediatrics and a
21 specialist in environmental public health. I have
22 worked at city, county, state, and federal public

1 health agencies, and Indian health service
2 facilities.

3 I'm here to speak in opposition to this
4 proposed rule and to state that this proposed rule
5 is unnecessary and it would harm EPA's ability to
6 evaluate health impacts of environmental
7 pollutants. It should not be finalized or
8 implemented.

9 This proposal has wording that makes it
10 appear noble and well-meaning, but it is a sheep
11 in wolf's clothing. This proposal will severely
12 hamper EPA's ability to use past and future
13 research on health effects of human exposure to
14 environmental chemicals and toxicants. It should
15 be withdrawn.

16 Both the HIPAA and the federal
17 regulations on human subjects research address
18 privacy as a concern of people who participate in
19 research. It's not as simple as redacting data
20 such as name, birth date, medical record number,
21 et cetera. You also have to not have data that
22 can be used to intuit or figure out who a study

1 subject is. So you have a study of Town A and
2 people who had heart attacks in July. If there is
3 age or zip code data associated with that, the
4 people that live in Town A could figure out, oh,
5 that's Mr. X down the street. So it would really
6 hamper the ability to use data, and environmental
7 health data often has zip code and year and a lot
8 of stuff that can be used to put together and
9 figure out who people are.

10 So that's how it would work. And I just
11 would like to say also that children have even
12 more health protections than adults because of
13 being smaller, and we have to be more concerned
14 for them. And especially living human subjects of
15 research who will continue to live, we need to be
16 extra careful to protect their privacy. And this
17 rule would either require data made public, or it
18 would prohibit using a lot of data that would
19 enable -- that would inhibit privacy protection.

20 So also it would decrease people's trust
21 in participating in research if they are fearful
22 of their personal identifiers being released or

1 people being able to know that they participated
2 in a study. They may not participate, so we would
3 have worse data for studies in the future because
4 of this rule.

5 And I would like to say that children do
6 not choose where they live, or where they go to
7 school, or what kind of water quality their water
8 they drink is, or the air that they breathe. It's
9 up to we, who are adults, the adults who are their
10 caretakers who choose where they live, and we who
11 set policies to make these decisions to keep
12 children healthy. And this rule would severely
13 harm children because it will throw out a lot of
14 data, and a lot of data that has been used to
15 form, already, established rules.

16 So I ask, why was this rule proposed? It
17 would eliminate use of scientific studies and
18 hamper future research. The rule was completely
19 unnecessary. We have mechanisms within scientific
20 institutions to transfer data so it's HIPAA
21 compliant and IRB approved, so we can verify
22 research and reevaluate it and confirm it. We

1 don't need this rule and it is, again, it's a rule
2 that's unnecessary and would hamper and harm EPA's
3 ability to carry out its functions.

4 So I'm going to end with a quote by a
5 professor from Carnegie Mellon University, Granger
6 Morgan. He used to chair the EPA Science Advisory
7 Board under George W. Bush. He said, "this
8 proposed rule is an attempt by people who aren't
9 interested in using science to find the truth to
10 raise doubts about what, at this stage, is very
11 clearly established and well-reviewed science."

12 And I urge the EPA to withdraw this
13 proposed rule and not implement it at all.

14 MR. ROBBINS: Thank you.

15 MS. HALL: Would Speaker Number 32, Erica
16 Bardwell, and Speaker Number 33, Jennifer Rebeb
17 (sic), come up to the speaker's table. And
18 Speaker Number 34, Molly Rauch, and Speaker Number
19 35, Barbara Gottlieb, take a seat at the on-deck
20 chairs.

21 Speakers are reminded to speak into the
22 mic and state your organization.

1 MS. REAVES: Hi. My name is Jennifer
2 Reaves. Reaves spelled R-E-A, V as in Victor, E-
3 S. I represent Moms Clean Air Force, Maryland.

4 Am I supposed to speak first? Oh, okay.

5 My name is Jennifer Reaves. I live in
6 Hyattsville, Maryland. Thank you for this
7 opportunity to offer comment. As a member of Moms
8 Clean Air Force, Maryland, I am here today to
9 speak out in opposition to Acting Administrator
10 Andrew Wheeler's attempts to censor science in the
11 name of transparency.

12 This dangerous censoring sign plan to
13 limit the scientific information EPA can use to
14 identify public health threatens and future and
15 safety of our children. This proposal will
16 essentially require researchers to make private
17 personal medical information public in order for
18 the EPA to use their research in its decision-
19 making.

20 This proposal also includes loop holes
21 that would exempt industry from having to disclose
22 details of their own studies. It is designed to

1 favor the fossil fuel and chemical industries,
2 limiting EPA's ability to protect us from toxic
3 pollution and chemicals. High quality science is
4 crucial to understanding the risk of our families
5 face every day, especially when it comes to air
6 pollution and toxic chemical exposure.

7 This proposal means that many studies on
8 populations, such as elderly, young people, and
9 people of color, groups who are often suffer
10 disproportionately from pollution would be
11 excluded from EPA consideration because making the
12 data public could identify and participating --
13 identify the participating individuals. Including
14 this important data from consideration means that
15 implementing this proposal could even further
16 exuberate negative environmental impacts on these
17 and other vulnerable communities.

18 This proposal puts our children's bodies
19 on the line by censoring research, making even low
20 levels of pollution with significant health
21 impacts instead of cleaning up their act.
22 Polluting industries want these kind of studies to

1 simply disappear.

2 My family and my fellow Marylanders are
3 counting on the sound and transparent science the
4 EPA has used for decades. And we are counting on
5 our medical records remaining private. I strongly
6 urge the EPA to stop this radical proposal for the
7 health and safety of all Americans. Thank you.

8 MR. ROBBINS: Thank you.

9 MS. BARDWELL: All right. Excuse me.
10 Thank you. My name is Erica Bardwell. Can you
11 hear me? Okay.

12 I am a local registered nurse. I work at
13 a local hospital. I'm also a member of Physicians
14 for Social Responsibility. Thanks for taking time
15 today.

16 Mr. Scott Pruitt is no longer here as EPA
17 administrator, but it does seem that this proposal
18 preserves the hallmark of his tenure. By that I
19 have to say, I mean a complete lack of shame.

20 This proposal masquerades as an attempt
21 to strengthen science, and by extension, public
22 health. But this is a bald, even shameless lie.

1 It would actually make public health research
2 impossible, or much, much more difficult, which
3 obviously is the real point.

4 If someone can't participate in medical
5 research without worrying that their identities or
6 parts of their medical records are going to be
7 rampaging around the public record, then they
8 simply won't do it. Which again, is the point.

9 Basically, shameless people say that to
10 themselves behind their scenes. But to us they
11 say that they're really concerned about us and
12 public transparency, but it's not true.

13 I saw a reference to a replication
14 crisis. Last I heard, the replication crisis was
15 mostly social sciences. There's not a huge
16 replication crisis in epidemiology. Certainly not
17 to the point where basic facts are in doubt.
18 There is no doubt that air pollution kills people,
19 that poison in water makes people sick, that toxic
20 soil grows toxic food. This is not in contention.
21 There's no replication crisis here.

22 So the only purpose of this rule could be

1 to avoid adding to the already damning weight of
2 this existing evidence. Basically, to make it
3 cheaper for a few people to literally poison
4 people for profit, which is ultimately a tragedy
5 for everybody.

6 I think the thinking is that sciencing
7 debates are going to bore the public, and most
8 other people have to work on a random Tuesday. I
9 swapped a shift to be here, but most people don't
10 have that option.

11 MS. DOA: Can you speak into the mic a
12 little bit more?

13 MS. BARDWELL: Sure. Okay.

14 MS. DOA: That's better. Thank you.

15 MS. BARDWELL: So, the true public
16 interest may not be represented here because
17 people have to work. But if this rule is
18 finalized, the public is going to howl once they
19 actually feel its effects and lose the protection
20 that they need from these studies. And I wouldn't
21 want to be the person left holding the bag when
22 that travesty happens.

1 Finally, as my grandmother used to say,
2 what sauce is for the goose is sauce for the
3 gander. If exposing personal information is
4 really required to have quality medical research,
5 I eagerly await the day this administration
6 proposes similar restrictions on, say,
7 pharmaceutical research. I wait for the day that
8 Pfizer can't get approval for its nth blood sugar
9 pill without revealing incredibly invasive
10 information about all of its research subjects. I
11 don't think that day is ever going to come,
12 because protecting people or advancing science
13 isn't really the goal.

14 Thanks for your time.

15 MR. ROBBINS: Thank you.

16 MS. HALL: Would Speaker Number 34, Molly
17 Rauch, and Speaker Number 35, Barbara Gottlieb
18 come to the speaker's table. And Speaker Number
19 36, Lyndsay Alexander, and Speaker Number -- is
20 there a Speaker Number 37 in the room? What's
21 your name?

22 MS. BENDER: Laura Bender.

1 MS. RAUCH: Hi. I'm Molly Rauch. Name
2 is spelled M-O-L-L-Y R-A-U-C-H. I'm Public Health
3 Policy Director with Moms Clean Air Force. We're
4 a national organization of more than a million
5 moms and dads fighting air pollution and climate
6 change for the sake of our children's health.

7 Thanks for this opportunity to offer
8 comment. On behalf of our more than 1 million
9 members, I am here today to strongly oppose the
10 administration's attempts to censor the science
11 used in public health decision-making. This
12 intentionally misleading proposal is being sold by
13 EPA leadership as an effort to increase
14 transparency. But the facts suggest that the real
15 motivation is simply to sweep under the rug the
16 scientific evidence disfavored by polluting
17 companies.

18 The proposal would prevent EPA from using
19 studies that are based on personal medical data,
20 thereby eliminating some of the most important
21 long-term epidemiological studies, investigating
22 the impacts of pollution on public health, and

1 hundreds of scientists have already spoken out
2 against this proposal.

3 Indeed, this flimsy proposal was designed
4 without adequate input from the scientific
5 community, according to the members of EPA's own
6 Scientific Advisory Board. It was rushed through
7 the regulatory process. It was originally
8 proposed with a gallingly short public comment
9 period that suggested an intention of casting less
10 light on the rulemaking process, not more.

11 For a proposal that posits a sweeping
12 change in the health-based rulemaking that is the
13 foundation of the EPA, it was quite the slight of
14 hand.

15 As a public health expert who has been
16 closely following EPA's rulemaking process for
17 more than a decade, it is evident to me that this
18 is a cynical ploy to bolster polluting industries
19 that don't like the results of longitudinal
20 research.

21 Who does this benefit? Who really
22 benefits from this charade? I must call it a

1 charade. Not the families everywhere who want to
2 breathe clean air and drink clean water. Not
3 frontline communities dealing with multiple
4 pollution exposures from many industrial sources.
5 Not the millions of children in the U.S. with
6 asthma across the country whose disease can be
7 worsened by small changes in air quality day to
8 day, not the elderly, not those with underlying
9 health problems whose likelihood of being admitted
10 to the hospital, of having a stroke, of having a
11 heart attack, even of dying, could depend on the
12 levels of particulate pollution in the air. It
13 does not benefit these people.

14 I have a master's degree in public
15 health. One of the most valuable things that I
16 studied in graduate school was how to evaluate the
17 reliability of epidemiological studies. We learn
18 the importance of considering many different
19 criteria in making these evaluations. Whether the
20 raw data was available to me, personally, to
21 review, was never grounds for automatically
22 discounting the credibility or reliability of any

1 given study.

2 The idea that an entire library of
3 research would be rejected wholesale, based simply
4 on that one external criteria, represents a crude
5 approach, to put it kindly.

6 We also, in grad school, learned about
7 the iron-clad importance of treating study
8 subjects ethically and with respect. And this is
9 a touchstone of public health practice. All
10 research on humans must be approved by
11 institutional review boards, and they prioritize
12 the privacy and consent of study subjects. There
13 are laws about this.

14 When study subjects are disrespected
15 terrible things can happen, which is why we were
16 required to learn about things like the, "Tuskegee
17 Study of Untreated Syphilis in African/American
18 (sic)Men," when we were in public health school.
19 We cannot go back to the time when the study
20 subject was a mere pawn in someone else's game.
21 Treating study subjects ethically requires
22 protecting their privacy.

1 Finally, we studied the tactics of
2 polluting industries and their shameful legacy of
3 attempting undermine science, whether it was the
4 tobacco industry or the lead industry, we learned
5 about the deliberate, expensive, decades-long
6 campaigns to protect corporate profits, and
7 meanwhile people were literally dying as a result.
8 This is an old story. We've heard it before, and
9 we're hearing that story again. Public health
10 professionals are trained to recognize history and
11 call it out, which is what we are doing today.

12 This proposal is an excuse to hamstring
13 researchers to weaken public health protections,
14 and to pad the profits of polluting industries.
15 As a public health professional, as a mother, and
16 on behalf of the 1 million members of Moms Clean
17 Air Force, I strongly urge the EPA to stop this
18 proposal for the health and safety of all
19 Americans. Thank you.

20 MR. TEICHMAN: Thank you.

21 MS. GOTTLIEB: Good morning. My name is
22 Barbara Gottlieb, G-O-T-T-L-I-E-B. I'm the

1 Director for Environment and Health at Physicians
2 for Social Responsibility.

3 On behalf of our 33 members, I'm here to
4 express our opposition to the proposed rule --
5 "Strengthening Transparency in Regulatory
6 Science."

7 The U.S. EPA plays a critical role in
8 keeping our nation and our families safe from
9 environmental exposures that can cause illness and
10 death. We thank you for that - and we count on you
11 for it. Because your role is vital to our health
12 and well-being, the nation relies on you to
13 formulate and enforce the most effective
14 protections possible, based on the best available
15 science. The medical and scientific studies that
16 underlie the EPA's decisions must be objective,
17 vetted, and present a full and accurate assessment
18 of the threats to health posed by the pollutants
19 under study.

20 To provide those full and accurate
21 assessments, studies need to relate exposure
22 levels to actual health outcomes in real human

1 beings, and to amass large data bases so that
2 researchers can draw valid conclusions.

3 In order to have reliable data and large
4 sample sizes, researchers frequently study the
5 records of patients treated in hospitals. Hospital
6 records, of course, include personal identifiers,
7 and disclosure of those identifiers would violate
8 privacy and confidentiality laws. Thus, the best
9 available data for many health studies cannot be -
10 in the literal sense -fully and openly shared.

11 However, to refuse to consider scientific
12 studies simply because they include personal
13 identifiers -- would be a great mistake, nor is it
14 necessary. Reviewers wanting to reproduce a study
15 in order to validate it can arrange to have
16 confidential access to key data. Furthermore,
17 scientists can assess the merits of published
18 research without seeing its data by considering
19 such published features as the study's research
20 design, the methods used for data collection and
21 analysis, and comparison with previous results.

22 In any case, to exclude credible peer-

1 reviewed scientific studies because the personal
2 identifiers cannot be released under the law, is
3 to exclude from the EPA's consideration many
4 important and valid studies. This would greatly
5 hamper our ability, your ability, to understand
6 the impacts of serious, even deadly, pollutants.

7 I'd like to cite, as example, three
8 studies that could be lost to consideration under
9 the proposed rule, on a topic I haven't heard
10 referred to today. These studies reveal
11 statistical correlations between exposure to
12 emissions from fracturing, or fracking, for oil
13 and gas, and serious health outcomes.

14 So the first is a study by University of
15 Pennsylvania and Columbia University researchers
16 and published in 2015 in the journal, *PLoS ONE*,
17 found that drilling and fracking activity in
18 Pennsylvania was associated with increased rates
19 of hospitalization for cardiology, neurology,
20 cancer, skin conditions, and urological problems.

21 In communities with the most wells, the
22 rate of cardiology hospitalizations was 27 percent

1 higher than in control communities with no
2 fracking. These findings are obviously of great
3 concern; we would not want them to be lost to the
4 EPA as you consider regulation of fracking related
5 emissions.

6 Yet because the data includes such things
7 as patients' names, diagnoses, addresses, and zip
8 codes, this valuable study could be, under the
9 proposed rule, excluded from EPA consideration.

10 Another study conducted in Pennsylvania
11 between 2005 and 2012, found that living near
12 fracking operations significantly increases asthma
13 attacks. This study was conducted by researchers
14 at Johns Hopkins University and it was based on a
15 study of 35,000 medical records of people with
16 asthma. This is just the sort of study that we
17 want EPA to base its health-protective regulations
18 on: a robust database conducted by researchers at
19 a respected institution and published, as this one
20 was, in the *Journal of the American Medical*
21 *Association Internal Medicine*.

22 Yet should the proposed rule be adopted,

1 this study could be disallowed because its 35,000
2 medical records cannot easily be scrubbed of
3 personal identifiers.

4 Third example, a study by the Johns
5 Hopkins Bloomberg School of Public Health and
6 other researchers, used data from the Geisinger
7 Health System on over 9,000 pregnant women and
8 their over 10,000 newborns between January 2009
9 and January 2013. The researchers found that the
10 pregnant women who live near active fracking
11 operations in Pennsylvania were at a 40 percent
12 increased risk of giving birth prematurely.
13 Premature birth is the leading cause of infant
14 death in this country.

15 So we're talking about data that indicate
16 that fracking operations could put newborn babies
17 at risk of death. This was a study published in
18 the peer review journal, *Epidemiology*.

19 Our families should have the benefit of
20 these studies and many more that might be
21 disregarded under the proposed rule. To exclude
22 them would be to weaken the scientific record and

1 undercut an accuracy and strength of EPA's
2 regulatory process, and to endanger human health.

3 For that reason, Physicians for Social
4 Responsibility opposes the proposed rule. Thank
5 you.

6 MR. ROBBINS: Thank you.

7 MS. HALL: Would Speaker Number 36,
8 Lyndsay Alexander, and Speaker Number 37, Laura
9 Bender, come up to the speaker's table.

10 And would Speaker Number 38, Liz
11 Borkowski, and Speaker Number 39, Janice Nolen,
12 take your seat at the on-deck chairs.

13 MS. ALEXANDER: Good morning. My name is
14 Lyndsay Alexander, A-L-E-X-A-N-D-E-R. I direct
15 the National Health Year Campaign at the American
16 Lung Association. I am also the mother of a
17 thriving toddler, who like all children, deserves
18 healthy air to breath, and safe water to drink
19 that won't make him sick or die prematurely.

20 I am here to ask EPA to withdraw this
21 proposed rule because I'm very concerned that
22 rather than foster transparency in regulatory

1 science, this rule promotes a callous effort to
2 suppress and censor the science used to inform EPA
3 policy to the detriment of millions of Americans'
4 health and well-being.

5 EPA's ability to effectively fulfill its
6 mission and protect public health from dangers,
7 such as air pollution, hinges on the ability of
8 its scientists to first evaluate the best
9 available scientific evidence of the health
10 threats of air pollution. Recognizing that
11 scientists' understanding of the relationship
12 between air pollution and public health would
13 continue to evolve, congress wisely required EPA
14 to review the latest evidence and revise air
15 pollution limits for six key pollutants every five
16 years. And then to work with states to reduce
17 pollution to meet the limit.

18 While more work remains, this basic
19 approach has worked exceedingly well at reducing
20 ambient air pollution, saving lives, and improving
21 health by preventing asthma attacks, heart
22 attacks, and many other negative health outcomes

1 from air pollution.

2 This proposed rule would require EPA to
3 exclude many of the best available peer-reviewed
4 and rigorously scrutinized studies from
5 consideration during decision-making, such as its
6 upcoming air quality standard reviews for ozone
7 and particulate matter.

8 Excluding studies for which raw data are
9 not available due to concerns over patient
10 confidentiality, or which do not meet vague
11 standard of reproducibility because studies were
12 conducted over long periods of time, or connected
13 to real world events beyond the control of
14 researchers, would greatly narrow the body of
15 evidence and the quality of the information that
16 EPA can consider. This would undoubtedly lead to
17 weaker protections and EPA's ability to estimate
18 the true threats of air pollution on human health,
19 and the benefits of reducing pollution, and thus
20 result in weaker air pollution limits.

21 In 1993, researchers at Harvard
22 University published a landmark air pollution

1 study, showing that particulate matter air
2 pollution was linked to premature death. The
3 Harvard Six Cities Study, as it is known, tracked
4 the health of 8,111 adults, and 14,000 children in
5 six small cities in the United States, beginning
6 in the 1970s.

7 This study found that people in cities
8 with cleaner air were living two to three years
9 longer than those living in cities with dirtier
10 air. Residents of Steubenville, Ohio, the city
11 with the dirtiest air, were 26 percent more likely
12 to die prematurely than were citizens of Portage,
13 Wisconsin, the city with the cleanest air.

14 What surprised researchers was that the
15 culprit was particulate matter, not sulfur-
16 dioxide, as they had thought. This was a very
17 important scientific discovery. This study, and
18 countless others since, have helped EPA to
19 understand that particle pollution in the air we
20 breathe, resulting from activities such as burning
21 coal for electricity, or diesel exhaust from
22 vehicles, harms human health in profound ways in

1 communities across the nation and has paved the
2 way for stronger air pollution limits designed to
3 protect public health.

4 But the data for the Harvard Six Cities
5 Study are not publicly available, and the study
6 was conducted over a long period of time that make
7 it very difficult to reproduce. Industry, and
8 their allies in congress previously challenged the
9 findings of this study and other similarly
10 important studies. Instead of blocking the
11 studies, as this proposal would do, EPA took a
12 logical step and referred them to an independent
13 third-party, the Health Effects Institute, for a
14 deep dive review.

15 There, autonomous reviewers examined the
16 data and developed a report that confirmed their
17 original findings. Other research has since
18 confirmed similar findings, including some studies
19 that use publicly available data sets. Critically
20 important studies, such as the Harvard Six Cities
21 Study would likely be excluded under this proposal
22 to the detriment of health protections. This

1 proposal would also affect other protections
2 currently in place, such as limits on certain
3 toxic air emissions from tail pipes and smoke
4 stacks, and information on the health effects of
5 many of these; more than 150 chemicals come from
6 older studies built on confidential patient or
7 private business data that cannot be made public.

8 This could -- this proposal could also
9 cull the use of research that includes
10 confidential business information or older studies
11 that has data stored on older technology that
12 can't be recovered, just to name two other
13 limitations.

14 Thank you for the opportunity to speak
15 today. The American Lung Association will submit
16 more detailed written comments.

17 MR. ROBBINS: Thank you.

18 MS. BENDER: Good morning. My name is
19 Laura Bender, L-A-U-R-A B-E-N-D-E-R, and I'm the
20 National Director of Advocacy of the American Lung
21 Association's Healthy Air Campaign.

22 The lung association's mission is to save

1 lives by improving lung health and preventing lung
2 disease. And as you know, we strongly oppose
3 EPA's so-called, "Strengthening Transparency in
4 Regulatory Science," proposal.

5 Today you've heard from many
6 representatives at the public health and medical
7 community about the ways this proposal would
8 undermine human health. I'd like to take a few
9 minutes to highlight the Lung Association's
10 concerns about the lack of transparency in EPA's
11 work on this rule.

12 The administration has attempted to rush
13 this rule forward at every turn, consistently
14 sacrificing expert analysis and public health
15 along the way. This is a sweeping proposal that
16 will impact a wide range of public health
17 safeguards, essentially affecting every future
18 decision at EPA based on science. And yet, EPA's
19 process in issuing it has been haphazard, rushed,
20 and anything but transparent.

21 First, back in April, then Administrator
22 Scott Pruitt, prematurely announced the proposal

1 while it was still undergoing interagency review
2 at the White House Office of Management and
3 Budget. Then, when media inquired about this
4 discrepancy, OMB actually backdated the clearance
5 by several days. This means that OMB only
6 reviewed the proposal for 48 hours. That's a
7 staggering tight timeline for such a sweeping
8 rule.

9 In a similar vein, EPA initially only
10 allowed a 30-day comment period with no public
11 hearing. The Lung Association was among the
12 organizations who requested 60 additional days and
13 a hearing. We greatly appreciate the additional
14 time and today's public hearing.

15 That additional time is crucial,
16 particularly because EPA has failed to complete a
17 regulatory impact analysis that explains the
18 impacts of the proposal, putting the burden on
19 commenters to do so instead.

20 EPA ignored another important opportunity
21 for review when it failed to consult the Agency's
22 own Science Advisory Board. The SAB, which

1 includes appointed members from this
2 administration, voted at its May meeting to
3 request to review the proposal.

4 In a letter to EPA last month, they said
5 that they were only made aware of the rule through
6 the press, and when it was published in the
7 Federal Register. The SAB said unequivocally,
8 quote, "The proposed rule merits review by the
9 Board."

10 We strongly encourage the Agency to move
11 forward with the SAB review of the proposal. To
12 refuse their request to do so would be
13 unprecedented and in direct contradiction of the
14 Agency's stated claim of wanting the best science
15 to inform its decision-making.

16 EPA rushed out this proposal after an
17 inadequate review process, and it shows. The
18 proposal falls short in several key ways. First,
19 EPA fails to provide any evidence that the changes
20 outlined in the rule are needed. EPA's existing
21 approach towards science, with its detailed review
22 and deliberation of the research, is already

1 transparent and has worked well for decades.

2 First, independent science has revealed
3 that studies prior to publication by recognize
4 journals, then independent and EPA staff
5 scientists reviewed them again and question every
6 aspect of the research in depth. And they do
7 these reviews in wide open processes, including
8 publication, public hearings, and comment periods.

9 EPA does not acknowledge the rigor of
10 this process in its proposal. Instead, it
11 attempts to justify this rule by claiming that the
12 Agency is following in the footsteps of scientific
13 journals. But last month as other commenters have
14 noted, several scientific journals issued a joint
15 statement highlighting their concerns with EPA's
16 proposal and pointed out that even though many
17 peer-reviewed publications have recently adopted
18 transparency policies, they are still able to
19 assess and use studies for which the underlying
20 data cannot be made public.

21 Second, EPA fails to define its
22 requirement that studies must be replicable. Does

1 EPA mean that the Agency couldn't consider a study
2 that looked at health impacts of a one-time event,
3 like a major oil spill?

4 The SAB also raised questions about EPA's
5 failure to define this and other terms.

6 Finally, EPA did not explain how the
7 Agency would implement the rule. The proposal
8 offers no process for public hearing, or even
9 consultation with the SAB over implementation.
10 What process would EPA use to review and assess
11 the existing research and revisions? What
12 guidance would the administrator receive to avoid
13 arbitrary decision-making over the fate of this
14 research?

15 And where would the massive staff time
16 and resources the EPA would need for such a
17 massive additional workload come from? What would
18 have to be sacrificed?

19 EPA's rushed process, its inadequate
20 review, its false attempt to claim that its policy
21 is supported by scientific journals, and its many
22 unanswered questions about how the proposal would

1 work, all underscore a core problem with this
2 rule. It would not improve the use of science of
3 EPA. It would not make the Agency's science-based
4 rules more transparent. It would permanently
5 damage EPA's ability to do its job to protect the
6 public.

7 On behalf of the millions of people with
8 lung disease that we serve who will be hurt by the
9 weaker pollution protections that would result
10 from this proposal, we urge EPA to withdraw this
11 rule to censor science. Thank you.

12 MR. ROBBINS: Thank you.

13 MS. HALL: Would Speaker Number 38, Liz
14 Borkowski, and Speaker Number 39, Janice Nolen,
15 come up to the speaker's table. And Speaker
16 Number 40, Albert Donnay, you're already at your
17 seat. Excellent. Also, if Speaker Number 15,
18 Harvey Fernbach, is in the room, you can take a
19 seat at the on-deck chairs. Last call.

20 MS. BORKOWSKI: Thank you for the
21 opportunity to present comments. My name is Liz
22 Borkowski, and I'm the Managing Director of the

1 Jacobs Institute of Women's Health, which is at
2 the Milken Institute School of Public Health at
3 the George Washington University.

4 The Jacobs Institute is concerned about
5 EPA's proposed rule, "Strengthening Transparency
6 in Regulatory Science," due to the harmful impact
7 it would have on women's health and reproductive
8 justice.

9 We urge EPA to withdraw it based both on
10 its detrimental impacts, and on the lack of a
11 demonstrated need for such a rule. EPA has failed
12 to demonstrate that its current processes for
13 considering science and regulation are inadequate.
14 It has not provided examples of any instances in
15 which insufficient transparency has resulted in
16 outcomes contrary to its statutory mandates or
17 executive orders.

18 Given extensive existing procedures used
19 by EPA and the scientific community at large to
20 ensure the quality of research, EPA has failed to
21 make a case that additional public access to data
22 is necessary.

1 The theoretical, but as yet
2 undemonstrated benefits of EPA's proposed rule,
3 must be weighed against the extensive and
4 unequally distributed costs of such an approach.
5 Failing to consider the best available evidence
6 because the underlying data are not publicly
7 available, would result in regulations that fail
8 to sufficiently protect public health. The
9 consequences would fall most severely on sensitive
10 groups not adequately protected by current rules,
11 which include racial and ethnic minorities, those
12 with low socio-economic status, the elderly, and
13 pregnant individuals and their eventual children.

14 My comments provide a few examples
15 related to reproductive health. First,
16 neurotoxicants are of particular concern to
17 pregnant people and the parents of young children.
18 In regulatory activities, to reduce exposure to
19 neurotoxicants, such as lead and methyl mercury,
20 EPA has relied on an extensive body of research.
21 This research includes longitudinal studies of
22 individuals who are exposed in utero or as young

1 children to higher levels of lead or methyl
2 mercury than would typically occur in the U.S.
3 today. It would not be ethical to publicly
4 release data from these studies, and it would not
5 be feasible, particularly for older studies that
6 used incompatible storage media to locate all
7 participants and obtain their permission.

8 EPA's use of research on lead and methyl
9 mercury also has implications for other agencies
10 that address these substances. For instance, the
11 Department of Housing and Urban Development relies
12 on EPA's renovation, repair, and painting rule in
13 its regulation of renovators working in housing
14 units, receiving HUD housing assistance where lead
15 paint is present.

16 EPA calculated the reference dose for
17 methyl mercury that EPA and the Food and Drug
18 Administration used to create guidelines on fish
19 consumption, including recommendations for
20 pregnant and breast-feeding women.

21 It does not appear that EPA has
22 undertaken the required interagency review process

1 to assess the implications of its rule for other
2 agencies.

3 Another neurotoxicant of concern for
4 reproductive health is the pesticide,
5 chlorpyrifos. Researchers followed a cohort of
6 children exposed to this pesticide before the
7 current ban on indoor use and found lower IQ and
8 working memory to be associated with higher levels
9 of prenatal chlorpyrifos exposure.

10 In a rulemaking process regulating
11 agricultural use of chlorpyrifos, EPA requested
12 the underlying data from the Columbia Center for
13 Children's Environmental Health. The response
14 from Columbia University explained that because of
15 the detailed sociodemographic and health-related
16 elements their data set contains, they did not
17 believe they could submit extensive individual-
18 level data to EPA in a way that would ensure
19 participants' confidentiality.

20 Such concerns are not uncommon with the
21 kinds of longitudinal data sets that allow
22 identification of long-term consequences of

1 environmental exposures. Often, the combination
2 of variables used in an analysis provides enough
3 information to identify individual participants
4 and may include sensitive information, such as
5 diagnosis of neurodevelopmental delays.

6 In addition, endocrine disrupting
7 chemicals are of great concern and reproductive
8 health and EPA has regulated some of these, such
9 as PCBs and PBDEs, under the Toxic Substances
10 Control Act.

11 Under reformed TSCA, EPA must make
12 decisions based on the weight of the scientific
13 evidence, but it is not clear how it can do so if
14 studies may be eliminated from consideration
15 because data sets are not publicly available.

16 If EPA moves forward with the rule it has
17 proposed, it will undermine science and regulatory
18 decision-making by making it difficult and
19 potentially impossible to consider the best
20 available science. This will have detrimental
21 impacts on reproductive justice, health equity,
22 and women's health. The Jacobs Institute of

1 Women's Health urges EPA to withdraw this rule.

2 MR. ROBBINS: Thank you.

3 MS. NOLEN: Hi. Thank you. My name is
4 Janice Nolen. It's J-A-N-I-C-E N-O-L-E-N, and I
5 am the National Assistant Vice President for
6 Policy for the American Lung Association.

7 The American Lung Association turns 114
8 years old this year. For more than a century we
9 have fought to save lives for protecting lung
10 health and preventing lung disease. We oppose the
11 proposed rule.

12 Many years ago, in the early 1980s, my
13 mother-in-law asked me to help her recruit
14 participants in a major new study that they were
15 doing. She worked for the American Cancer Society
16 then. They were looking to create a huge database
17 of ordinary Americans would be willing to provide
18 them with confidential information about their
19 health and medical experiences, and would allow
20 them to track those for years to come.

21 I was so pleased that two men from my
22 church choir in Nashville agreed to participate.

1 They completed the forms and other paperwork, and
2 became two of the more than half million
3 participants in the cancer prevention study too.

4 Fast-forward a decade or so and I learned
5 that their data were now part of a landmark study,
6 the American Cancer Society study that revealed
7 the risks to human health from breathing air
8 pollution that I and my colleagues at the lung
9 association were working hard to clean up.

10 Their data and private health and medical
11 information, from hundreds of thousands of others
12 were -- from hundreds of thousands of other
13 people, who were pointing the way, the need to
14 clean up emissions from power plants, from diesel
15 engines and fuels, and many other sources. I
16 never dreamed when my mother-in-law made her first
17 request to me that EPA scientists and other
18 researchers would mark that study as one of two
19 seminal studies that helped reshape our
20 understanding of the health risks from particulate
21 matter air pollution.

22 None of us then would have ever dreamed

1 that the information these two men provided would
2 have helped to identify and underline the threat
3 to human life posed by microscopic particles in
4 the air we breathe.

5 Furthermore, that study and the Harvard
6 Six Cities Study became examples, not only of
7 ground-breaking research, but of how questions
8 about that research can be reviewed and resolved
9 without having to lose the entire study.

10 Unfortunately, that is an example that
11 this proposal clearly fails to understand. These
12 two studies with decades-old patient data and
13 others in the long list of studies that found
14 evidence of harm from industrial emissions are
15 unique events that no one hopes to replicate, like
16 gulf oil spills, clearly appear to be targets of
17 this proposed rule.

18 Studies that have been -- long been
19 targets of industry polluters and their allies,
20 remains so in this proposal.

21 Once published, these studies raised
22 alarms in the public health community about the

1 increased likelihood of premature death from
2 particulate matter, widespread in the nation. The
3 studies raised alarms within industry too, about
4 the increased likelihood that their polluting
5 sources would have to clean up their emissions.
6 Industry kicked in messaging developed by the
7 tobacco industry, to challenge the science using
8 the same arguments we have in this proposal.

9 I have in my office, a page from a 1999
10 *U.S. News and World Report* article on the
11 challenges to these studies that could have been
12 written this year.

13 Scientists are working to become more
14 transparent in their research. More researchers
15 use publicly available information, but some
16 studies cover populations that are so limited in
17 size or specialized in their characteristics that
18 these data could not be posted on the web for all
19 the world to see. Anyone who has an account on
20 Facebook should have a visceral knowledge of how
21 important keeping confidential data confidential
22 can be.

1 Meanwhile, EPA could readily review
2 historical data and studies in ways that respect
3 patient confidentiality and the gifts of data from
4 people like my two choir member friends.

5 So far, EPA has failed to show any reason
6 that these changes are needed in the current
7 system. Failed in its own transparency on this
8 issue, in fact since EPA has not sought SAB review
9 of this, and has not provided sufficient rationale
10 for why EPA needs this change, much less how they
11 would this rule going forward.

12 We request EPA to withdraw this proposal.
13 Thank you.

14 MR. ROBBINS: Thank you.

15 MS. HALL: Would Speaker Number 40,
16 Albert Donnay, come to the speaker's table. And
17 Speaker Number 41, Mona Sarfaty.

18 MR. DONNAY: Thank you. My name is
19 Albert Donnay. My comments are based on
20 experience gained from 40 years working on
21 regulatory science as an environmental health
22 engineer and toxicologist, as a research

1 scientist, public health activist, clinician,
2 consultant, peer-reviewer for academic journals,
3 environmental groups and government agencies at
4 all levels, including EPA.

5 I'm glad I get to follow the last two
6 speakers because I want to highlight that although
7 EPA's proposal to "Strengthen Transparency in
8 Regulatory Science" is needed, did not give any
9 examples of regulations that had been undermined
10 by a lack of such transparency.

11 I want to remind everyone here what's at
12 stake and what happened the first time EPA,
13 congress, and environmental groups had to decide
14 whether it was okay to base regulatory standards
15 on published scientific studies whose achieves
16 were no longer available for review.

17 They got the answer right then, and I
18 hope they'll get it right again now. It was May,
19 1983, 35 years ago, and the EPA was about to
20 publish a new national ambient air quality
21 standard for carbon monoxide based on nine studies
22 by a distinguished cardiologist at the VA, Dr.

1 Aronow. When the *Washington Post* reported that
2 he'd been barred by FDA a year earlier for
3 submitting a wave of false medical experiments
4 after he admitted, quote, "fudging his lab reports
5 in human drug studies."

6 Although EPA's head of the Office of Air
7 Quality Planning and Standards said the Agency
8 had, quote, "No reason to believe anything was
9 wrong with Aronow's CO studies," whose data Aronow
10 claimed at the time, "are excellent and can't be
11 questioned." EPA nevertheless appointed a special
12 team of agency and outside scientists to review
13 his work, quote, "When we read that Aronow had
14 done some kooky things."

15 A month later, *The Post* reported the
16 shocking results under the headline, "EPA Probe
17 Criticizes a Study Used in Air-Quality Standard."
18 The team had said, quote, "Could not resolve the
19 issue of possible falsification of data because,"
20 quote, "no data were available." Aronow told them
21 he'd discarded the archives of all of his CO
22 studies after first storing them in his garage for

1 years, and offering it to EPA because they didn't
2 want it.

3 The investigators noted considerable
4 concerns about the validity of the results
5 reported, quote, "Raw data were lost or discarded.
6 Adequate records were not maintained, available
7 data were of poor quality, and quality control was
8 nonexistent."

9 And Aronow's published results were
10 consistently too good to be true. They found it,
11 quote, "Rather remarkable that in 10 years of
12 research his papers showed," quote, "not even one
13 missing data point." They concluded that EPA,
14 quote, "Cannot rely on Aronow's data due to the
15 concerns we've noted." And they recommended the
16 Agency commission new research to attempt to
17 replicate Aronow's findings.

18 Congressional hearings and the GAO
19 investigation followed, after which Administrator
20 Ruckelshaus agreed that EPA would not rely on any
21 of Aronow's studies in future rulemakings, but
22 only on studies whose archives were still

1 available for review.

2 In coordination with the California Air
3 Resources Board and the Health Effects Institute,
4 EPA commissioned a series of new controlled human
5 exposure studies on CO, and since 1994, has based
6 the CO NAAQS exclusively on just six of them, all
7 of which published their individual results in
8 deidentified form so they would be available for
9 public review in perpetuity.

10 And it's a good thing they did since all
11 the larger archives of these studies were
12 eventually discarded by their authors without
13 being offered to EPA. This history shows that EPA
14 can and should base regulations solely on studies
15 whose methods and data are available for review.
16 To base regulations on studies that can't be
17 reanalyzed is not science, and there is no need
18 for it. Even federal rules that are based on
19 older epi studies, like the last particulate NAAQS
20 rule in 2013 that cited just six studies could and
21 should be based on more recent research that
22 better reflects current air quality.

1 Over 500 studies a year are now published
2 on particulate epidemiology, and many are in high
3 quality journals that require authors at least to
4 make all their deidentified data and methods
5 available to reviewers, if not to all readers from
6 the posting of supplemental material.

7 Given EPA's interest in basing
8 regulations on more transparent research, EPA
9 should start requiring all the researches it
10 funds, intermural and extramural, to publish their
11 results in such journals. Hopefully this will
12 prompt less rigorous journals that don't require
13 the posting of supplemental material to update
14 their policies.

15 In conclusion, the Aronow scandal shows
16 EPA cannot rely exclusively on traditional peer
17 review to detect misconduct. Aronow reviewers at
18 11 leading journals, as well as EPA staff and
19 their scientific advisors on the CASAC, who also
20 review the studies before recommending that nine
21 be cited as the basis for the CO NAAQS.
22 Unfortunately, despite all this publicity, none of

1 Aronow's studies were retracted, and the EPA has
2 started citing them again, most recently in the
3 2010 integrated science assessment of the CO
4 literature.

5 EPA's proposal to strengthen transparency
6 and regulatory science could stop this from
7 happening again, which is why I support it and
8 encourage my colleagues to do so as well. Thank
9 you.

10 MR. ROBBINS: Thank you.

11 MS. SARFATY: Can you hear me?

12 MR. ROBBINS: Yes.

13 MS. SARFATY: Yeah. Okay. Respected EPA
14 panelists and fellow citizens, my name is Mona
15 Sarfaty. I'm a physician trained in family
16 medicine and public health. I practice primary
17 care medicine and taught medical and public health
18 students in three different academic medical
19 centers for 35 years.

20 Today I direct a program in climate and
21 health at George Mason University in Fairfax,
22 Virginia. I also direct a consortium of physician

1 societies called the Medical Society Consortium on
2 Climate and Health, whose 550,000 members are more
3 than half the physicians in the United States.

4 The Consortium seeks to inform the public
5 and policy makers about the health harms of
6 climate change, and the health benefits of climate
7 solutions. I'm submitting the formal comment of
8 the consortium in written form in a separate
9 document.

10 The EPA is proposing to change the rules
11 that dictate what evidence must be considered as
12 the basis for protecting the public's health. As
13 a physician who spent a summer in Southern
14 California during college and didn't see Mount
15 Wilson looming in front of me for an entire week
16 because of smog, I am incredulous.

17 I remember well the pain in my chest when
18 trying to play tennis on those smoggy days. This
19 was the early 70s, when a republican president was
20 creating the EPA. Now, 50 years hence, tremendous
21 evidence has accumulated that validates my
22 symptoms and the negative effect that unhealthy

1 hair -- air, has on people who must breathe it.

2 After that summer, as a practicing
3 physician, I took care of people with asthma and
4 chronic lung disease who were at greater risk on
5 bad air days. So it is shocking to me that the
6 EPA would propose putting aside huge amounts of
7 thoroughly reviewed evidence on the causal
8 connections between air pollution and poor health,
9 claiming that the basis for this conclusion was
10 secret.

11 Today, I lead a consortium comprised of
12 the country's largest medical societies whose
13 doctor members are highly concerned about the
14 health harms of climate change. The similarities
15 between the current EPA willingness to disregard
16 established science about the connection between
17 carbon dioxide and global warming, and the
18 willingness to disregard solid evidence about the
19 impact of air pollution on health, are glaring.

20 Despite overlapping evidence from every
21 country in the world, and the entire U.S. climate
22 science enterprise, not to mention major federal

1 agencies like NOAA and NASA, the EPA leadership
2 does not accept or recognize reality.

3 To all of us whose lives are dedicated to
4 helping people get and stay healthy, there is a
5 secret lurking in the science of air pollution and
6 global warming. It is not what we have long-known
7 about how burning fossil fuels creates waste
8 products that damage and inflame our lungs. This
9 has been validated by voluminous overlapping
10 research studies. The secret is not that carbon
11 emissions from burning fossil fuels are warming
12 our climate, exacerbating the health harms of air
13 pollution, and causing other dangers to our
14 health, from heat waves, wild fires, pollen, and
15 storms.

16 The secret is hiding in plain sight.
17 Fighting air pollution is the greatest public
18 health opportunity of our time. It's the greatest
19 public health opportunity of our time.

20 Reducing polluting fumes and emissions
21 from fossil fuels will rapidly improve our health
22 and fight climate change.

1 When an EPA's not so secret agenda is to
2 promote fossil fuels, two things follow. The fact
3 that fossil fuels are the major contributor to
4 both air pollution and global warming must be
5 undermined or denied. And the research that
6 documents this reality and how it harms our health
7 must be attacked. It's not hard to see that the
8 approach is to mislead people by wrapping these
9 attacks in rhetoric that's alternatively scary as
10 in secret science, and high-minded, as in
11 transparency.

12 We're told that the rationale for the new
13 proposed strengthening transparency standard is
14 that individual and medical records included in
15 research were secret. In fact, like all medical
16 records, they were confidential and they remain
17 so.

18 The record shows that the same argument
19 of secrecy against scientific studies has been
20 used by polluting industries going back many
21 years.

22 Health providers know that the facts may

1 be scary when our health is threatened. But we
2 also know that denying or ignoring facts blinds us
3 to discovering and acting on the best ways to heal
4 medical problems and protect our health. We can't
5 let that happen. The EPA must live up to its
6 charge and work to face facts and protect our
7 environment and our health. With this proposed
8 regulation, its leadership is pointing in the
9 opposite direction. Thank you.

10 MR. ROBBINS: Thank you.

11 Okay. We're going to take a short recess
12 now and we'll resume at noon.

13 [Morning session adjourned.] [On the
14 record 12:00 p.m., Afternoon session.]

15 MS. RADZIKOWSKI: Good afternoon. If everyone
16 will please take their seats? Hello, and thank
17 you for coming. My name is Mary Ellen Radzikowski
18 and I am in the EPA's Office of Research and
19 Development and I'm one of the hearing officials.
20 Joining me is Lynn Flowers, also from the Office
21 of Research and Development and we have a number
22 of folks: Nanishka Albaladejo, Lauren Hall and

1 Lesley Stobert from SC&A Inc., helping with
2 logistics.

3 The purpose of today's hearing is to accept public
4 comments on the EPA proposed rule, "Strengthening
5 Transparency in Regulatory Science". EPA is
6 accepting comments on all aspects of the proposed
7 regulation. This public hearing is a formal legal
8 proceeding and the testimonies will become part of
9 the administrative record on which EPA will base
10 its decision.

11 Public notice of this hearing was published in the
12 Federal Register on April 30, 2018 (83 FR 18768).
13 EPA is proposing this rule under the authority of
14 5 U.S.C. 301, in addition to the authorities
15 listed in the proposed rule document dated April
16 30, 2018.

17 My role is to ensure that the EPA receives your
18 comments in an orderly fashion. Although EPA
19 panel members here may ask clarifying questions,
20 the intent of the hearing is to listen to your
21 comments, not to discuss or debate the proposal.
22 Now I will go through a few housekeeping items and

1 ground rules: Please refrain from interrupting
2 speakers or asking questions. Shouting,
3 noisemaking or any disruptive conduct which
4 prevents speakers or hearing officials from being
5 heard are not permitted. Please listen quietly so
6 that we can hear each testimony and to ensure that
7 the court reporter is able to record comments
8 accurately and listeners on the phone hear the
9 oral testimonies. For everyone's awareness, this
10 hearing is open to the press and we may have
11 members of the media present with us today. This
12 event is also open to any form of recording,
13 video, audio and photos. We ask that you not
14 cause any disruption to those testifying or
15 observing the hearing.

16 There is no formal lunch break scheduled. You may
17 leave and return to the hearing. Please note that
18 you will need to clear security again so please be
19 aware of the time.

20 If you would like to make an oral comment at
21 today's hearing and did not pre-register to speak,
22 please see the hearing staff at the registration

1 table located right outside the doors here. If
2 you would like to provide a written comment for
3 the official record, you may hand-submit it to EPA
4 staff today, or mail, fax or email your comments.
5 See the staff at the registration table for
6 instructions on how to do that. There is a
7 comment box at the registration table where you
8 can leave hardcopies of your oral testimony or
9 written comments. All comments received will be
10 included in the official docket. If you submit
11 written comments, it is not necessary for you to
12 give the same comments orally; written comments
13 and oral testimonies will receive equal
14 consideration by EPA in preparing its final
15 rulemaking decision.

16 EPA has extended the comment period. Written
17 comments must now be received on or before August
18 16, 2018. EPA will only consider comments related
19 to the proposed rule, "Strengthening Transparency
20 in Regulatory Science", so please refrain from
21 making comments that are not related to this
22 action.

1 EPA will not be providing responses during the
2 hearing. Rather, EPA will prepare a written
3 summary of the comments received that includes
4 responses.

5 The summary of the Response to Comments, the
6 document, will be available at the time EPA issues
7 its final decision. EPA will not make a final
8 decision until all comments submitted during the
9 public comment period have been considered.

10 The hearing is being recorded by a court reporter,
11 who will be preparing a verbatim record of this
12 hearing.

13 Please speak clearly and slowly into the
14 microphone so that the court reporter can
15 accurately record your comments. A copy of the
16 transcript will be placed in the docket. This
17 hearing is also being audio streamed through Adobe
18 Connect via the telephones.

19 The hearing is scheduled -- started at 8 AM this
20 morning and is scheduled to go to 8 PM. We're in
21 the second session: 12pm-4pm.

22 Public restrooms are located down both sides of

1 the hall. At the doors we have staff that can
2 escort you out and back. Please note the location
3 of the emergency exits. Please take a moment to
4 silence your cell phones.

5 Speakers should have been given a sticker upon
6 check-in that lists your assigned session. If you
7 plan to speak and have not received a sticker,
8 please be sure to check in at the registration
9 table. For this session, the speaker sticker
10 color is white, so if you have a white sticker
11 you're registered for this session.

12 Speakers will be called to the speakers' table
13 (located right over there) in pairs by their
14 speaker number.

15 When it is your turn to speak, please come to the
16 table, state and slowly spell your name for the
17 record, and if you are appearing on behalf of
18 someone or another organization. If you are not
19 in the room when it is your turn to speak, I will
20 recall you after all other speakers have made
21 their oral comments. Each speaker will be
22 allotted 5 minutes for remarks. Elected and

1 appointed government officials may be provided
2 additional time, since they represent large groups
3 of constituents. Speakers will be notified when
4 their time has ended. Our timekeeping system
5 consists of green, yellow, and red lights. When
6 you begin to speak, the green light will come on
7 to indicate you have your 5 minutes. The yellow
8 light indicates that you have 1-minute left and
9 when the red appears, your 5 minutes are over. At
10 that moment, if needed, I will politely interrupt
11 you and ask you to wrap-up your testimony to give
12 others an opportunity to speak.

13 At this time, we are going to begin.

14 MS. STOBERT: If Speakers Numbers 1, Pamela
15 Miller, and 2, Elizabeth Geltman, will come to the
16 speakers table and Speakers 3 and 4, Patricia
17 Koman and Alexis Adiman would go to the on-deck
18 seating located near the stage.

19 MS. MILLER: Good afternoon, my name is Pamela
20 Miller, P-A-M-E-L-A, M-I-L-L-E-R. I serve as
21 Executive Director and provide these comments on
22 behalf of Alaska Community Action on Toxics.

1 We're a nonprofit, public interest environmental
2 health, research and advocacy organization,
3 dedicated to protecting public health. I also
4 serve as principle investigator of multiyear
5 research studies involving several universities
6 that investigate exposures and health outcomes
7 concerning endocrine-disrupting chemicals in
8 collaboration with Arctic indigenous communities
9 in Alaska. I traveled the distance to Washington,
10 D.C., from St. Lawrence Island, Alaska, in the
11 Northern Bering Sea, two full days of travel,
12 where we are conducting summer field research and
13 interrupted this because EPA did not make it
14 possible to provide remote testimony.

15 Through a process known as global distillation,
16 the Arctic has become a hemispheric sink for
17 contaminants that are carried on atmospheric and
18 oceanic currents into the north where they
19 concentrate in the bodies of fish, wildlife and
20 people. Indigenous peoples of the Arctic are
21 among the most highly exposed populations on Earth
22 to persistent bio-cumulative and toxic chemicals

1 because of their reliance on traditional foods
2 including fish and marine mammals that they use
3 for their spiritual, cultural and physical
4 sustenance. The communities that I work with on
5 St. Lawrence Island also have higher exposures to
6 chemical contaminants from military operations
7 associated with formerly used defense sites. Our
8 research elucidates exposure pathways, body
9 burdens and health outcomes associated with
10 chemicals including PCBs, PBDEs (or polybrominated
11 diphenyl ethers) and other flame retardants and
12 also perfluorinated substances in homes, in air,
13 water, traditional foods and in the blood serum of
14 the Yupik people of St. Lawrence Island. Our
15 studies have shown elevated body burdens as well
16 as disruption of thyroid function associated with
17 these exposures to certain PBDEs and
18 perfluorinated substances. We are now beginning a
19 research study to investigate exposures to PCBs,
20 PBDEs and currently used organophosphate flame
21 retardants in young Yupik children, age 2 to 12,
22 because elders and other community leaders are

1 concerned about possible adverse effects on
2 children's neurodevelopment. They're concerned
3 that chemical exposures might harm the children's
4 abilities to learn the languages, songs and
5 stories that are so vital for the continuance of
6 the culture of Yupik people. Participation is
7 dependent on the trust of confidentiality that
8 they give to us as researchers. Our research team
9 submits each proposal to rigorous review to the
10 National Institute of Environmental Health
11 Sciences. In the process of the research, we
12 submit also to several institutional review boards
13 for approval to collect sensitive and detailed
14 information on health and behavior as well as
15 spatial and demographic data in an ethical manner
16 that protects human subjects. We have published
17 results of our research in 11 peer-reviewed
18 journal articles after receiving approval from the
19 tribal leadership. These findings help inform
20 interventions and policies to reduce burdens of
21 toxic exposures and prevent further harm to public
22 health. These studies are possible only because

1 we guarantee to protect the medical privacy of
2 participants, again dependent on trust of the
3 researchers. We gather detailed information about
4 peoples' health and occupational histories,
5 practices in their homes and communities that
6 might relate to chemical exposures. If the
7 proposed rule were to go into effect, studies such
8 as these would not be considered by EPA when it
9 makes decisions about chemicals and pollutants
10 that are poisoning the people of the Arctic such
11 as decisions to limit the production and use of
12 persistent biocumulative toxics and other
13 chemicals including those regulated under TSCA and
14 FIFRA and in regulations that hold military and
15 industrial polluters responsible for contamination
16 of air, waters and lands under CERCLA, the Clean
17 Air Act and the Clean Water Act. EPA indicates
18 that the proposed rule is intended to strengthen
19 transparency of EPA regulatory science; however,
20 we find this a duplicitous claim. It would favor
21 industry data protected as confidential business
22 information over public peer-reviewed research.

1 We support the best scientific evidence to inform
2 regulatory decisions. However, this rule would
3 have a dangerous counter effect by limiting the
4 science that should be used to inform decisions
5 about public health. Furthermore, we disagree
6 with the agency's conclusions as stated in the
7 proposed rule document that this action does not
8 have tribal implication as specified in the
9 executive order and requiring government to
10 consult with tribes. This rule would
11 disproportionately affect vulnerable populations
12 including American Indian and Alaska Native People
13 and, therefore, is relevant and requires
14 consultation.

15 MS. RADZIKOWSKI: Excuse me, your time is up. We
16 need to be fair to others.

17 MS. MILLER: I'll wrap up to say that we urge EPA
18 to end this rulemaking promptly and we strongly
19 oppose the proposal. Thank you.

20 MS. RADZIKOWSKI: Thank you.

21 MS. GELTMAN: Good afternoon. Thank you for the
22 opportunity to comment on EPA's proposal entitled,

1 "Strengthening Transparency in Regulatory
2 Science." My name is Elizabeth Glass Geltman, G-
3 E-L-T-M-A-N. I am a Professor of Environmental
4 Health Policy at the City University of New York -
5 - the CUNY School of Public Health, located in
6 Harlem. I am the author of 17 books on
7 environmental and natural resources policy, a
8 peer-reviewer of numerous journals and have worked
9 on EPA-regulated matters for over 30 years. I am
10 also the Chair Elect of the Law Section of the
11 American Public Health Association. As a
12 professor, I aim to advance public health by
13 preventing people from getting sick. My efforts
14 address reducing health impacts, and hence
15 controlling health costs, by evaluating chemical
16 and environmental determinants of health.
17 Although EPA's rule aims to establish a clear
18 policy concerning the use of dose-response data
19 and models that underlie pivotal regulatory
20 policy, the rule is, in fact, a continuation of
21 the Trump administration's two for one regulatory
22 reform policy announced in Executive Orders 13771,

1 13777, and 13783. The rule promises, "to change
2 agency culture and practices regarding data access
3 so that scientific justification for regulatory
4 actions is truly available for validation and
5 analysis." However, the new rule, in fact,
6 creates new regulatory hurdles by discounting and
7 precluding consideration of long-standing,
8 established scientific practice. Rather than
9 promoting the transparency of scientific
10 information used to create environmental
11 regulations, the rule will obscure the democratic
12 process, slow the pace of science and progress,
13 and potentially prevent important health data from
14 being considered by U.S. EPA in outlying important
15 environmental policy. Administrative procedure
16 requires the EPA consider data submitted by the
17 public in evaluating regulations. Let's be clear,
18 scientific studies have always been of uneven
19 quality. EPA has a process in place, including
20 use of Scientific Advisory Board testimony and
21 written and oral public notice and comment, using
22 internal and external peer review to evaluate

1 data. Depending on context some studies are given
2 greater weight than others. Some studies are
3 disregarded entirely. It is inappropriate,
4 however, and unlikely unlawful -- and likely to be
5 unlawful -- under the Administrative Procedure
6 Act. For EPA to categorically eliminate certain
7 types of studies, and hence certain types of data,
8 without considering context. But, even more
9 important, eliminating studies, unless all
10 underlying data is made public, is hazardous to
11 human health and the environment. Longitudinal
12 medical and epidemiological studies are often
13 conducted over years, if not decades. Many
14 studies require people who are study subjects to
15 share very, very personal information, often on
16 the legal or ethical condition that private
17 medical information provided will be protected
18 from public view. EPA is not, and has never been,
19 in the regular business of replicating studies.
20 Timing and the cuts in EPA funding make
21 replicating studies as a condition of promulgating
22 regulations an impossibility. EPA has presented

1 no scientific reason to prevent use of human
2 health studies simply because the underlining
3 medical records are not available for public
4 inspection and review. One size fits all rarely
5 works in fashion and it is even more unworkable in
6 science and regulation. It is imperative the EPA
7 allow consideration of all available scientific
8 data pertinent to a proposed environmental rule or
9 regulation including random, controlled human
10 health trials and other epidemiological studies.
11 Eliminating certain classes of human health
12 studies would be like picking NFL players in the
13 draft without allowing any scouting reports or
14 eliminating the minor league in baseball. It
15 doesn't make sense in sports; it makes even less
16 sense when we're safeguarding our nation's air,
17 water and land. For the reasons stated, I
18 respectfully request the EPA withdraw the
19 misleadingly-named rule entitled, "Strengthening
20 Transparency in Regulatory Science." Thank you
21 very much for allowing me to speak. My comments
22 are my own. I'm happy to answer questions and I